CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guil	2 PAGE#						
	•	(Ethics Commission filers) 00010009	1 of 35				
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Christopher	М	OFFICE USE ONLY				
NAME	NICKNAME LAST Chris Riley	SUFFIX	Date Received 2014 OCT 2				
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / SUITE #; P.O. Box 30062	CITY; STATE; ZIP CODE	OEN CEN				
ADDRESS	Austin, TX 78703		Date Hand-delivered or Date Postmarked				
Change of Address			L RR				
			Receipt # (Am) ount				
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST Cora	MI	Date Processed				
NAME			Date Imaged				
	Corky Hilliard	SUFFIX					
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / 4120 Lawless St. Austin, TX 78723	SUITE #; CITY; STATE;	ZIP CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER , (512) 459-6342	EXTENSION					
8 REPORT TYPE	January 15 30th day before 6	election Runoff	15th day after campaign treasurer appointment (officeholder only)				
	July 15 X 8th day before el	ection Exceeded \$500 limit	Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year	Month D	ay Year				
·	тн 09/26/2014	10/25/	2014				
10 ELECTION	ELECTION DATE ELECTION Month Day Year Print 11/04/2014		X General Special				
11 OFFICE	OFFICE HELD (flany) City Council, Place 1	12 OFFICE SOUGHT (if kn) City Council, Dist					
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

				<u> </u>			
13 C/OH NAME Riley	, Christopher		14 ACCOUNT # 00010009	(Ethics Commission filers)			
15 NOTICE FROM	have been made with	stice of political expenditures by political committees to support the condition the candidate's or officeholder's knowledge or consent. Candidate or consent. Candidate or consent.	andidate / officeholder. I	These expenditures may e required to report this			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	٠,				
	GENERAL	COMMITTEE ADDRESS ·					
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		 			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS					
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	2,157.00			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	28,131.00			
EXPENDITURE TOTALS	3. TOTAL I	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED .		397.51			
	4. TOTAL	AL POLITICAL EXPENDITURES		63,414.17			
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	17,800.43			
OUTSTANDING LOAN TOTALS	1	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	25,000.00			
17 AFFIDAVIT	<u> </u>						
	Dans O'Shee Ship of Dans Bleen and Dans and Dans	I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Coo	all information requi				
No.	SUSAN C. HARRY Notary Public, State of Texas My Commission Expires May 16, 2015 Signature of Candidate or Officeholder						
			/	<i>}</i>			
AFFIX NOTARY	STAMP / SEAL ABO\	/E		- 10 /			
Sworn to and subscrib	. 17	ne said Chr'S Cillo	, this the	day			
	200	Susa. Han	NA	tan			
Signature of officer adm	inistering nath	Print name of officer administering oath	Title of officer admi	inistering oath			

P.O.Box 12070

<u></u>					<u> </u>
	The Instruction	אס Guide explains how to complete this form.	,	1 PAGE # Schedule: 1/2	21 Report: 3/35
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Alvarado, Blanca	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/21/2014	6 Contributor address; City; State; Zip Code 2914 Rio Grande St Austin, TX 78705-3616		\$250.00	
		•		(If travel outside of	Texas, complete Schedule T)
9	Principal occur Co-Owner	ation / Job title (See Instructions)	10 Employer (See In El Sol y La Lun		· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor	(Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; City; State; Zip Code 4106 Medical Pkwy Austin, TX 78756-3722	,	\$350.00 	
	,			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Fult name of contributor ☐ out-of-state PAC (ID# Barnstone, Mateo	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/22/2014	Contributor address; City; State; Zip Code 3917 Threadgill St Austin, TX 78723-4506		\$350.00 	
	\$			(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Mateo Barnstor		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/24/2014	Contributor address; City; State; Zip Code 4303 Greystone Dr Austin, TX 78731-1201		\$350.00 	
	Principal occur	ation / Job title (See Instructions)	Employer (See In	L'	Texas, complete Schedule T)
	Land Develor	,	Waterloo Devel		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/30/2014	Contributor address; City; State; Zip Code 10821 Range View Dr Austin, TX 78730-1499		\$250.00 	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Highland Resou		
	ACUI LOIAIG		inginana Nesot	a, 505, 1110.	

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE#	24. Donot: 4/25
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	21 Report: 4/35 (Ethics Commission filers)
4	Date	5 Full name of contributor	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/24/2014	6 Contributor address; City; State; Zip Code 2810 W Fresco Dr Austin, TX 78731-5022		\$100.00	I I I
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Butler, Clay	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/09/2014	Contributor address; City; State; Zip Code 11112 Claro Vista Cv Austin, TX 78739-1917		\$350.00	
				1.1	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In The Butler Firm		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/16/2014	Contributor address; City; State; Zip Code 2103 Schulle Ave Austin, TX 78703-2141		\$350.00]
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	nation / Job title (See Instructions)	Employer (See In Armbrust & Bro	structions)	
•	Date	Full name of contributor ut-of-state PAC (ID# Carter, Kristi	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/12/2014	Contributor address; City; State; Zip Code 2903 Allerford Ct Cedar Park, TX 78613-1622		\$200.00	[
				(if travel outside of	Texas, complete Schedule T)
	Principal occup CEO	pation / Job title (See Instructions)	Employer (See In SuperShuttle	<u> </u>	, , , , , , , , , , , , , , , , , , ,
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/12/2014	Contributor address; City; State; Zip Code 2903 Allerford Ct Cedar Park, TX 78613-1622	,	\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	eation / Job title (See Instructions)	Employer (See In		The state of the s
ı		General Manager	SuperShuttle	,	

	The Instruction	on Guide explains how to comp	olete this form.		1 PAGE # Schedule: 3/2	21 Report: 5/35		
2	FILER NAME	Riley, Christopher			3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor Chase, Julie	out-of-state PAC (ID#	*)	7 Amount of contribution (\$)	8		
	10/13/2014	6 Contributor address; (2911 Harris Blvd Austin, TX 78703-1929	City; State; Zip Code		\$100.00	 		
		7,00,111, 77, 70, 70, 70, 70, 70, 70, 70, 70, 70			(If travel outside of	Texas, complete Schedule T)		
	67 : 1				<u> </u>			
9	Principal occup	ation / Job title (See Instructions	5)	10 Employer (See In:	structions)			
	Date	Full name of contributor Coker, Judith	☐ out-of-state PAC (ID#	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/26/2014	Contributor address; 6 3611 Bridle Path Austin, TX 78703-2646	City; State; Zip Code		\$100.00	 		
					(If traval outside of	Texas, complete Schedule T)		
	Dringing again	ation / Job title (See Instructions	2)	Employer (See In:		Texas, complete ochedule 1,		
	Filincipal occup	`		,	structions)	,		
	Date	Full name of contributor Collins, Gregory	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/16/2014	Contributor address; (2510 El Greco Cv Austin, TX 78703-1510	City; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Business Owi	ation / Job title (See Instructions ner	s)	Employer (See In: Centro Develop		,		
	Date	Full name of contributor Crane, Marie	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/16/2014	Contributor address; (1502 Marshall Ln Austin, TX 78703-3409	City; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Consultant	ation / Job title (See Instructions	š)	Employer (See In: M. Crane & Ass				
	Date	Full name of contributor Curry, Mark	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/10/2014	Contributor address; (4000 Tablerock Dr Austin, TX 78731-1425	City; State; Zip Code		\$100.00	 		
		!			(If travel outside of	Texas, complete Schedule T)		
	Principal occur	ation / Job title (See Instructions	3)	Employer (See Ins		· , · · · · · · · · · · · · · · · · · ·		
		and the time (see mondolorie	-,		, /			

	The instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 4/2	21 Report: 6/35			
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)			
4	Date	5 Full name of contributor uut-of-state PAC (ID# Davis, Chester)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/22/2014	6 Contributor address; City; State; Zip Code 12708 Azalea Cir Buda, TX 78610-2867		\$350.00	 			
	•			(If travel outside of	Texas, complete Schedule T)			
9	Principal occup CEO	ation / Job title (See Instructions)	10 Employer (See In American Firew					
	Date	Full name of contributor ut-of-state PAC (ID# Davis, Jeanell)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/22/2014	Contributor address; City; State; Zip Code 12708 Azalea Cir Buda, TX 78610-2867		\$150.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
-	10/17/2014	Contributor address; City; State; Zip Code 1920 N Clark St Apt 17P Chicago, IL 60614-5401		\$350.00				
		Officago, 12 00014-5401		(If travel outside of	Texas, complete Schedule T)			
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In Sram, LLC	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/24/2014	Contributor address; City; State; Zip Code 1801 E 16th St Austin, TX 78702-1216		\$100.00				
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
-	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/20/2014	Contributor address; City; State; Zip Code 12 Chapin Ln	,,,,	\$350.00				
		Austin, TX 78746-2542			 _			
	Delasiantera	etics / lish tills (Con Instruction -)	Earley/Carl	'	Texas, complete Schedule T)			
	Principal occup Real Estate D	ation / Job title (See Instructions) Development	Employer (See In: Ardent Resident					

	The Instruction	אס Guide explains how to comp	lete this form.		1 PAGE # Schedule: 5/2	21 Report: 7/35
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Duhon, David	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/11/2014	6 Contributor address; C 520 Ácademy Dr Austin, TX 78704-1815	City; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions))	10 Employer (See In:	structions)	
	Date	Full name of contributor [East Land Scot	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/14/2014	Contributor address; C 1711 Pearl St Austin, TX 78701-1024	ity; State; Zip Code		\$100.00	
	·				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions))	Employer (See In:	structions)	
	Date	Full name of contributor [Eisman, Denise	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; C 703 Caribou Ridge Trl Pflugerville, TX 78660-3707	lity; State; Zip Code		\$100.00	
						Texas, complete Schedule T)
	Principal occup Executive Dir	ation / Job title (See Instructions) ector)	Employer (See In: Austin Hotel & L	structions) lodging Associatio	on
	Date	Full name of contributor [Eisman, Denise	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable) food & beverages for
	10/13/2014	Contributor address; C 703 Caribou Ridge Trl Pflugerville, TX 78660-3707	city; State; Zip Code		\$100.00 	l event
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Executive Dir	ation / Job title (See Instructions) ector)	Employer (See In: Austin Hotel & L	structions) .odging Associatio	n
	Date	Full name of contributor Ewen, Chris	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
ē	10/24/2014	Contributor address; C PO Box 49238 Austin, TX 78765-9238	city; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions))	Employer (See Ins	structions)	

P.O.Box 12070

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	אס Guide explains how to con	plete this form.		1 PAGE # Schedule: 6/2	21 Report: 8/35		
2	FILER NAME	Riley, Christopher			3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor Fitch, Julia	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/02/2014	6 Contributor address; 1509 Shoal Creek Blvd	City; State; Zip Code		\$100.00	 		
	•	Apt A Austin, TX 78701-1032			(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)			
	Date	Full name of contributor Forrest, Hugh	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/10/2014	Contributor address; 703B E 50th St No B	City; State; Zip Code		\$250.00	i I		
	,	Austin, TX 78751-2615	Λ		1 :	Texas, complete Schedule T)		
	Principal occup Event Planne	ation / Job title (See Instruction	ns)	Employer (See In SXSW	structions)			
	Date	Full name of contributor Forrest, Vivian	☐ out-of-state PAC (ID#	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/10/2014	Contributor address; 703 E 50th St No B	City; State; Zip Code		\$250.00			
		Austin, TX 78751-2615				, _ ` `		
	B-iiI				<u>, </u>	Texas, complete Schedule T)		
	homemaker	ation / Job title (See Instruction	15)	Employer (See In None	structions)			
	Date	Full name of contributor Galligan, Jude	out-of-state PAC (ID#	, , , , , , , , , , , , , , , , , , , 	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/04/2014	Contributor address; 603 Davis St Apt 102	City; State; Zip Code	`	\$350.00	 		
		Austin, TX 78701-4227			(If travel outside of	Texas, complete Schedule T)		
	Principal occup Real Estate	ation / Job title (See Instruction	ns)	Employer (See In TAGR Inc	structions)			
	Date	Full name of contributor Gass, Laura	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/13/2014	Contributor address; 1615 Lupine Ln Austin, TX 78741-1149	City; State; Zip Code		\$100.00			
		Adding TA LOTAL TITO			(figure assists -=	Texas, complete Schedule T)		
	Principal	ntion / Joh title /Can tester calle	ne)	Employer /Pos In	l	reves' combiere acuednie ()		
	енпорагоссор	ation / Job title (See Instruction	10/	Employer (See In	structions)			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/2	21 Report: 9/35
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Goldsby, Greta)	7 Amount of contribution (\$)	8
	10/02/2014	6 Contributor address; City; State; Zip Code 4412 Rosedale Ave Austin, TX 78756-3224		\$100.00	
		<u> </u>	·	l`	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/01/2014	Contributor address; City; State; Zip Code 1700 S 2nd St Unit B		\$100.00	
	*	Austin, TX 78704-3442			
				`	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 210 Lavaca St Apt 3004		\$350.00	
		Austin, TX 78701-4598		'	Texas, complete Schedule T)
<u> </u>	Principal occup Firefighter	ation / Job title (See Instructions)	Employer (See In: Austin Fire Dep		1
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/24/2014	Contributor address; City; State; Zip Code 2307 Fortune Dr Austin, TX 78704-3237		\$250.00	 -
		7,000,00,000			
	D. C. C.	action (lab 6th (Constanting)	F1/G1	<u> </u>	Texas, complete Schedule T)
	Principal Prop	ation / Job title (See Instructions) perty Mgmt	Employer (See In: Endeavor Real		
	Date	Full name of contributor ut-of-state PAC (ID# Hightower, Susan		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/22/2014	Contributor address; City; State; Zip Code 2214 Alta Vista Ave Austin, TX 78704-5227		\$100.00	
		·		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	, and the second of the second

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/2	21 Report: 10/35
2 FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hill, R. Michael)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/29/2014	6 Contributor address; City; State; Zip Code 1704 Pin Oak Ln Round Rock, TX 78681-1542		\$300.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Requested	pation / Job title (See Instructions)	10 Employer (See In: Requested	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/23/2014	Contributor address; City; State; Zip Code 706 West Ave Apt D		\$350.00	
	Austin, TX 78701-2732			
			,	Texas, complete Schedule T)
Storytelling T	pation / Job title (See Instructions) echnologist	Employer (See In: Zebra Imaging	structions	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/22/2014	Contributor address; City; State; Zip Code PO Box 90245 Austin, TX 78709-0245		\$100.00	
			•	Texas, complete Schedule T}
Principal occu	pation / Job title (See Instructions)	Employer (See In:	structions)	,
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26/2014	Contributor address; City; State; Zip Code 2125 Brunswick Dr Austin, TX 78723-2052		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26/2014	Contributor address; City; State; Zip Code 114 W 7th St Ste 700	.,	\$350.00	
	Austin, TX 78701-3011		(If traval autoida -4	Tayas complete Schodule T)
	pation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
Financial Adv	/isei	The Kentor Co		

The Instructi	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/2	21 Report: 11/35
2 FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kimbell, Chad)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/25/2014	6 Contributor address; City; State; Zip Code 611 W Elizabeth St Austin, TX 78704-2333		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Owner	pation / Job title (See Instructions)	10 Employer (See In Kbge	structions)	
Date .	Full name of contributor ut-of-state PAC (ID# Kinslow, Stephen B.	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/15/2014	Contributor address; City; State; Zip Code 1600 Concordia Ave Austin, TX 78722-1928		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		Toxas, complete concerns 1,
	ident of Austin Community College District	Retired	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/24/2014	Contributor address; City; State; Zip Code 307 E 2nd St Austin, TX 78701-4011		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Real Estate	pation / Job title (See Instructions) Brokerage	Employer (See In Knight Real Est	structions) ate Corporation	·
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/17/2014	Contributor address; City; State; Zip Code 555 E 5th St Apt 929 Austin, TX 78701-4047		\$200.00	
				Texas, complete Schedule T)
Principal occu Librarian	pation / Job title (See Instructions)	Employer (See In City of Cedar P		,
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/13/2014	Contributor address; City; State; Zip Code 11000 Onion Creek Ct Austin, TX 78747-1608		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu President &	pation / Job title (See Instructions) CEO	Employer (See In Austin Convent	structions)	

	The Instruction	on Guide explains how to con	nplete this form.		1 PAGE# Schedule: 10)/21 Report: 12/35
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor LAN-PAC	out-of-state PAC (ID#	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
-	09/26/2014	6 Contributor address; 2925 Briarpark Dr Houston, TX 77042-3720	City; State; Zip Code		\$350.00	
	* *				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	nation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Larry, Joseph	out-of-state PAC (ID#	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/11/2014	Contributor address; 2303 Hartford Rd Austin, TX 78703-2436	City; State; Zip Code		\$100.00	
	•				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
,	Date	Full name of contributor Laves, Harold	□ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address, 7508 Stonecliff Cir Austin, TX 78731-1515	City; State; Zip Code		\$250.00	<u> </u>
					(If traval outside of	Texas, complete Schedule T)
	Principal occup	Leation / Job title (See Instruction	ns)	Employer (See In	1 '.	,
	Retired	·		none	· · · · · · · · · · · · · · · · · · ·	
	Date	Full name of contributor Laves, Myra	out-of-state PAC (ID#	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; 7508 Stonecliff Cir Austin, TX 78731-1515	City; State; Zip Code		\$300.00	I I
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In		Texas, complete contracte 1)
	Retired	·		none	,	
,	Date	Full name of contributor Linebarger, Dale	☐ out-of-state PAC (ID#	()	'Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address, 3 Niles Rd Austin, TX 78703-3137	City; State; Zip Code		\$350.00]
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instruction	ns)	Employer (See In none		toxas, complete scriedule ()
	٠.,					**

	The higrouping	W Curr ovalaine how to complete this form		1 PAGE#			
	THE INSTRUCTION	on Guide explains how to complete this form.	•		/21 Report: 13/35		
2	FILER NAME	Riley, Christopher		3 ACCOUNT#	(Ethics Commission filers)		
				00010009			
4	Date	5 Full name of contributor ut-of-state PAC (ID#	<u> </u>	7 Amount of	8 In-kind contribution		
		Linebarger, Libby		contribution (\$)	description (if applicable)		
					1		
	10/13/2014	6 Contributor address; City, State; Zip Code		\$350.00	i I		
		3 Niles Rd Austin, TX 78703-3137			' }		
					·		
				<u> </u>	Texas, complete Schedule T)		
9	retired	ation / Job title (See Instructions)	10 Employer (See In none	structions)			
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution		
		Lippincott, Catherine	-	contribution (\$)	description (if applicable)		
					l		
	10/23/2014	Contributor address; City; State; Zip Code 2322 Townes Ln		\$350.00	1		
		Austin, TX 78703-2332					
				(If traval outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete schedule 1/		
	Co-owner		Guero's Taco B				
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		Elppincott, Rob		.,,	l ' ' '' '		
	10/23/2014	Contributor address; City; State; Zip Code		\$350.00	[·		
		2322 Townes Ln		Ψ000.00	<u> </u> -		
		Austin, TX 78703-2332					
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions)	Employer (See In	,			
	Co-owner		Guero's Taco B	ar			
	Date	Full name of contributor	<u>; </u>	Amount of	In-kind contribution		
		Manlove, Kylé		contribution (\$)	description (if applicable)		
	09/26/2014	Contributor address; City; State; Zip Code		\$100.00	1		
		800 W 38th St Apt 11304					
		Austin, TX 78705-1387			· 		
	Dringing spays	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	Principal occup	ation 7 Job title (See Instructions)	Employer (See In	structions)			
			·				
	Date	Full name of contributor ut-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		McKenzie, Brad		Continuation (\$)	description (ii applicable)		
	10(44/2014	Contributor addraga: City: State: 7in Code		#250.00			
	10/14/2014	Contributor address; City; State; Zip Code 4525 Court Of St James		\$350.00	·		
		Austin, TX 78730-3427					
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	·		
	Controller		Ranger Excava	ting	•		

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 12	/21 Report: 14/35
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≠ Mckenzie, Mark	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/14/2014	6 Contributor address; City; State; Zip Code 9505 Scenic Bluff Dr Austin, TX 78733-6036		\$350.00	
	÷			(If travel outside of	Texas, complete Schedule T)
9	Principal occup president	ation / Job title (See Instructions)	10 Employer (See In Ranger Excava		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/14/2014	Contributor address; City; State; Zip Code 4525 Court Of St James Austin, TX 78730-3427		\$350.00	
	,			(If travel outside of	Texas, complete Schedule T)
	Principal occup homemaker	ation / Job title (See Instructions)	Employer (See In none	structions)	· .
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	(n-kind contribution description (if applicable)
	10/23/2014	Contributor address; City; State; Zip Code 2007 Kinney Ave Austin, TX 78704-4007		\$60.00	
		3		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/14/2014	Contributor address; City; State; Zip Code 10503 Tweedsmuir Dr Austin, TX 78750-3445		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Vice Presider	ation / Job title (See Instructions)	Employer (See In Carollo Enginee	structions)	Totals, complete contradic 1/
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Code 2012 Ford St Austin, TX 78704-2838		\$350.00	
		- 105mi, (7.7070T-2000		(If traval autoida of	Texas, complete Schedule T)
	Principal occup Psychiatrist	ation / Job title (See Instructions)	Employer (See In Donald Miller Li	structions)	TONGS, COMPLETE SCHEAMER 17

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 13	/21 Report: 15/35	
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethićs Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Neavel, Nancy)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/08/2014	6 Contributor address; City; State; Zip Code 2905 Scenic Dr Austin, TX 78703-1042		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2014	Contributor address; City; State; Zip Code 2905 Scenic Dr Austin, TX 78703-1042		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/17/2014	Contributor address; City; State; Zip Code 2905 San Gabriel St Ste 218		\$350.00	 	
		Austin, TX 78705-3541			Texas, complete Schedule T)	
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Azuma Leasing			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/12/2014	Contributor address; City; State; Zip Code 1719 Deerfield Dr Austin, TX 78741-3704		\$100.00	! !	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Pence, Bert)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/01/2014	Contributor address; City; State; Zip Code 708 Rio Grande St Austin, TX 78701-2779		\$250.00	 	
		((If travel outside of	Texas, complete Schedule T)	
	Principal occup Real Estate D	ation / Job title (See Instructions) leveloper	Employer (See In Pence Propertie			

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 14	/21 Report: 16/35		
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Pfluger, Kenneth	1)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/30/2014	6 Contributor address; City; State; Zip Code 2408 Bridle Path Austin, TX 78703-3210		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Property Man	ation / Job title (See Instructions) agement	10 Employer (See In Self Employed	structions)			
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/25/2014	Contributor address; City; State; Zip Code 2108 Hartford Rd Austin, TX 78703-3125		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Investor		PowerFin Partn		•		
				<u> </u>	1		
	Date	Full name of contributor	i)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/24/2014	Contributor address; City; State; Zip Code 209 E Live Oak St Austin, TX 78704-4356		\$350.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In		Texas, complete ochedule 1)		
	Real Estate	dien des tite (ess maitsatere)	Self				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/01/2014	Contributor address; City; State; Zip Code 1630 Waterston Ave Austin, TX 78703-3935		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
•	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/21/2014	Contributor address; City; State; Zip Code 3216 Harris Park Ave Austin, TX 78705-2532		\$199.00			
			N.,	(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			

P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 15	/21 Report: 17/35
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDI Ream, Kevin	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/20/2014	6 Contributor address; City; State; Zip Code 555 E 5th St Apt 823 Austin, TX 78701-3959	• • • • • • • • • • • • • • • • • • • •	\$350.00	Texas, complete Schedule T
9		nation / Job title (See Instructions) oncert Promoter	10 Employer (See In The Lodge	structions)	
—			<u> </u>	·····	
	Date	Full name of contributor ut-of-state PAC (ID) Reeves, Maria	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Code 1000 Alta Vista Ave Austin, TX 78704-1337		\$350.00	
	Distribution in			<u> </u>	Texas, complete Schedule T)
	homemaker	pation / Job title (See Instructions)	Employer (See In none	structions	
	Date	Full name of contributor	#) .	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Code 1000 Alta Vista Ave Austin, TX 78704-1337		\$350.00	
				<u>'</u>	Texas, complete Schedule T)
	Principal occup Software Eng	pation / Job title (See Instructions) pineer	Employer (See In Datical	structions)	
	Date -	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
			• • • • • • • • • • • • • • • • • • • •		[
	09/29/2014	Contributor address; City; State; Zip Code 807 W Lynn St 110		\$350.00	[
		Austin, TX 78703-4780		(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	pation / Job title (See Instructions)	Employer (See In Blueprint	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 1503 Wild Cat Holw West Lake Hills, TX 78746-3640		\$150.00	
		· ·		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
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	The Instruction	on Guide explains how to comp	olete this form.		1 PAGE# Schedule: 16	/21 Report: 18/35	
2	FILER NAME	Riley, Christopher			3 ACCOUNT# 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor Sanders, Christopher	☐ out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/20/2014	6 Contributor address; (404 E 34th St Austin, TX 78705-1600	City; State; Zip Code		\$100.00		
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions	;)	10 Employer (See In:	structions)		
	Date	Full name of contributor Sapire, Gregory	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/14/2014	Contributor address; C 2801 Via Fortuna Ste 350	City; State; Zip Code		\$350.00	 	
		Austin, TX 78746-7596	•			·	
	Principal occur	ation / Job title (See Instructions		Employer (See In:	, ,	Texas, complete Schedule T)	
	Attorney	anony soo the (ose mandenons	"	K&L Gates LLP			
	Daté	Full name of contributor Shea, Mike	ut-of-state PAC (ID#	()	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/09/2014	Contributor address; C 4801 Broken Bow Pass Austin, TX 78745-2833	City; State; Zip Code	,	\$350.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Executive Pla	ation / Job title (See Instructions nner	3)	Employer (See In	structions)		
	Date	Full name of contributor Simmons, Deborah	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/13/2014	Contributor address; (2200 S Interstate 35 Austin, TX 78704-4436	Dity; State; Zip Code		\$100.00	l . I	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions	;)	Employer (See In:	structions)	·	
	Date	Full name of contributor Smith, Charles	Out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/14/2014	Contributor address; C 1713 Newfield Ln Austin, TX 78703-3320	City; State; Zip Code		\$250.00	 	
	,		•		(If travel outside of	Texas, complete Schedule T)	
		ation / Job title (See Instructions	3)	Employer (See In:	`	···	
	Executive Dir	ector		Equality Texas			

The Instruc	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	7/21 Report: 19/35
2 FILER NAMI	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Sonleitner, Karen		7 Amount of contribution (\$)	8
10/13/2014	6 Contributor address; City; State; Zip Code 1712 Pasadena Dr Austin, TX 78757-1842		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
	upation / Job title (See Instructions) iner - Auditor's Office	10 Employer (See In Travis County	structions)	
Date	Full name of contributor ut-of-state PAC (ID: Stallings, Robin	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26/2014	2208 Santa Rosa St		\$200.00	.
	Austin, TX 78702-4628			
	1			f Texas, complete Schedule T)
Executive [upation / Job title (See Instructions) Director	Employer (See In BikeTexas	istructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution . description (if applicable)
10/13/2014	Contributor address; City; State; Zip Code 9000 Marly Cv Austin, TX 78733-3281		\$315:00	. -
			(If travel outside of	f Texas, complete Schedule T)
Principal occ Civil Engine	upation / Job title (See Instructions) eer	Employer (See In Bury, Inc.	structions)	
Date	Full name of contributor ut-of-state PAC (ID: Swanson, Andrea	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/17/2014	Contributor address; City; State; Zip Code 397 Wild Rose Dr Austin, TX 78737-4537		\$350.00	-
		•	(If travel outside of	Texas, complete Schedule T)
Principal occ Principal	upation / Job title (See Instructions)	Employer (See In DCI Engineers	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/17/2014	Contributor address; City; State; Zip Code 397 Wild Rose Dr Austin, TX 78737-4537		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occ Principal	upation / Job title (See Instructions)	Employer (See In DCI Engineers		
		1		

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The	Instructio	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 18	/21 Report: 20/35
2 FILER	R NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Da	ite	5 Full name of contributor ☐ out-of-state PAC (ID# Thurnher, Gregory	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/28	8/2014	6 Contributor address; City; State; Zip Code 800 W 5th St Austin, TX 78703-5434		\$350.00	
				(if travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) egulatory Policy	10 Employer (See In Energy Future I		
Da	ite	Full name of contributor □ out-of-state PAC (ID# Turner, Scott)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/02	2/2014	Contributor address; City; State; Zip Code 3613 Laurel Ledge Ln		\$350.00	
		Austin, TX 78731-4047		(If travel outside of	Texas, complete Schedule T)
	ipal occup e Builder	vation / Job title (See Instructions)	Employer (See In RH Holdings LL		
Da	ite	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/21	1/2014	Contributor address; City; State; Zip Code 2204 Canonero Dr Austin, TX 78746-1836		\$350.00	[[
		•		(If travel outside of	Texas, complete Schedule T)
	ipal occup sician	eation / Job title (See Instructions)	Employer (See In Neurology Instit		
Da	ite	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/21	1/2014	Contributor address; City; State; Zip Code 2204 Canonero Dr Austin, TX 78746-1836		\$350.00	
		·		(If travel outside of	Texas, complete Schedule T)
Princi owne		ation / Job title (See Instructions)	Employer (See In The Park	structions)	
Da	ite	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26	6/2014	Contributor address; City; State; Zip Code PO Box 460968		\$350.00	
		San Antonio, TX 78246-0968		/lf trough a stallab at	Toyon complete Schoolele T\
Princi	inal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
Lawy		whom took title (obe mail bottoms)	Graves Doughe	erty Hearon & Mod	ody, P.C.

The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19	/21 Report: 21/35
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Wachter, Michelle	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/13/2014	6 Contributor address; City; State; Zip Code 3127 E Rocky Slope Dr Phoenix, AZ 85048-8322		\$150.00	
	1		(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	· .
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/13/2014	Contributor address; City; State; Zip Code 3127 E Rocky Slope Dr Phoenix, AZ 85048-8322		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	,	,
Engineer	,	Carollo Enginee		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/30/2014	Contributor address; City; State; Zip Code 1307 Leona St Austin, TX 78702-2119		\$250.00	! !
			(If travel outside of	' Texas, complete Schedule T)
Principal occu Mechanic	pation / Job title (See Instructions)	Employer (See In The Yellow Bike		
Date .	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/13/2014	Contributor address; City; State; Zip Code 7124 Quimper Ln Austin, TX 78749-1949		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	'	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/25/2014	Contributor address; City; State; Zip Code 1805 Elton Ln Austin, TX 78703-2915		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu homemaker	pation / Job title (See Instructions)	Employer (See In		,, ,,
nomemaker	·	HOTE		

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	אס Guide explains how to complete this form.	(1 PAGE # Schedule: 20	/21 Report: 22/35
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Whelan, Matt	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/25/2014	6 Contributor address; City; State; Zip Code 1805 Elton Ln Austin, TX 78703-2915		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Real estate d	ation / Job title (See Instructions) evelopment	10 Employer (See In Live oak gottes	structions)	
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Code 2501 Quarry Rd		\$350.00	· !
		Austin, TX 78703-3727			
		•		(If travel outside of	Texas, complete Schedule T) 🔲
	Principal occup	ation / Job title (See Instructions)	Employer (See In		
	Clinical Assis	tant	University Medi	cal Center Bracke	nridge
⊨				1	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Code 2501 Quarry Rd		\$350.00	
		Austin, TX 78703-3727		(If travel outside of	Texas, complete Schedule T)
	Principal occur	ration / Job title (See Instructions)	Employer (See In		, <u> </u>
	Director of Te		SXSW	31140101137	
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	!)	Amount of	In-kind contribution
		Wilcox, Toni		contribution (\$)	description (if applicable)
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1
	10/09/2014	Contributor address; City; State; Zip Code		\$350.00	
	•	4801 Broken Bow Pass Austin, TX 78745-2833			
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occur	eation / Job title (See Instructions)	Employer (See In	<u> </u>	- cade, compress constant . ,
	retired	audi / Job litie (See instructions)	None	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		Tromack, Diad		``'	
	10/21/2014	Contributor address; City; State; Zip Code		\$350.00	
	10/2 1/2014	200 Congress Ave		Ψ050.00	
		Unit 14F Austin, TX 78701-4532			
				(If travel outside of	Texas, complete Schedule T)
-	Principal occur	vation / Job title (See Instructions)	Employer (See In	<u> </u>	
	Small Busine	·	Self	•	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/21 Report: 23/35		
2	FILER NAME	Riley, Christopher		3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor . ☐ out-of-state PAC (ID: Wooten, Kennon	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/11/2014	6 Contributor address; City; State; Zip Code 1018 Reagan Ter Austin, TX 78704-2635		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/23/2014	Contributor address; City; State; Zip Code 610 Rathervue Pl Austin, TX 78705-3128		\$100.00	 		
					·		
	Daine in all airean		T ====================================	L .	Texas, complete Schedule T)		
	Principal occup	vation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/08/2014	Contributor address; City; State; Zip Code PO Box 6029 Austin, TX 78762-6029		\$350.00	' ' ' ' '		
				(If travel outside of	Texas, complete Schedule T)		
		eation / Job title (See Instructions)	Employer (See In	structions)			
	Consultant		lbex Strategies				
			1				
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		•					

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Riley, Christopher 00010009 Schedule: 1/11 Report: 24/35 4 Date 5 Payee name 09/30/2014 Ahuja, Jason Payee address City; State; Zip Code Amount (\$) 4600 Monterey Oaks Blvd. #613 \$540.00 Austin, TX 78749 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Contract labor Salaries/Wages/Contract Labor **OF EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/15/2014 Ahuja, Jason Amount (\$) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 \$567.50 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Office sought: Complete ONLY it direct expenditure to benefit C/OH Date Payee name Bean, Samuel 10/02/2014 Amount (\$) Payee address City; State; Zip Code 2604 Paramont Ave. \$533.20 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Bean, Samuel 10/15/2014 Amount (\$) Payee address City; State; Zip Code 2604 Paramont Ave. \$585.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (if travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check If Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Riley, Christopher 00010009 Schedule: 2/11 Report: 25/35 5 Payee name 4 Daté Bill Blome 09/30/2014 Payee address City; State; Zip Code 6 Amount (\$) 1405 Waller St. \$2,000.00 Austin, TX 78702 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Salary Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/15/2014 Bill Blome Amount (\$) Payee address City; State; Zip Code 1405 Waller St. \$2,000.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSÉ** Salary Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name Bray, Timothy 09/30/2014 Amount (\$) Pavee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 \$1,250.00 Austin, TX 78741-4601 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Bray, Timothy 10/15/2014 Amount (\$) Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 \$1,250.00 Austin, TX 78741-4601 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT# (TEC filers) 2 FILER NAME 1 PAGE# Riley, Christopher 00010009 Schedule: 3/11 Report: 26/35 4 Date 5 Payee name Cecil, Willie 09/30/2014 Payee address City; State; Zip Code 6 Amount (\$) 4714 Rowena Ave. \$660.00 Austin, TX 78751 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** ■ Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Cecil, Willie 10/15/2014 Amount (\$) Payee address City; State; Zip Code 4714 Rowena Ave. \$660.00 Austin, TX 78751 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Facebook 09/29/2014 Amount (\$) Payee address City: State: Zip Code 1601 S. California Ave. \$751.26 Palo Alto, CA 94304 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE political online advertising Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/01/2014 Facebook Amount (\$) Payee address City: State: Zip Code 1601 S. California Ave. \$110.87 Palo Alto, CA 94304 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** political online advertising Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Advertising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Accounting/Banking Legal Services Solicitation/Fundraising Expense Consulting Expense Food/Beverage Expense Travel In District Candidate/Officeholder/Political Committee Event Expense Polling Expense Travel Out Of District OTHER (enter a category not listed above) Office Overhead/Rental Expense Fees Printing Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher 00010009 Schedule: 4/11 Report: 27/35 4 Date 5 Payee name Facebook 10/07/2014 City; State; 6 Amount (\$) 7 Payee address Zip Code 1601 S. California Ave. \$779.75 Palo Alto, CA 94304 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** political online advertising Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held:. direct expenditure to benefit C/OH Date Payee name 10/14/2014 Facebook Amount (\$) Payee address City; State; Zip Code 1601 S. California Ave. \$894.95 Palo Alto, CA 94304 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** political online advertising Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Facebook 10/20/2014 Amount (\$) Payee address City; State; Zip Code 1601 S. California Ave. \$773.20 Palo Alto, CA 94304 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** political online advertising Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/21/2014 Facebook Amount (\$) Payee address City; State; Zip Code 1601 S. California Ave. \$798.87 Palo Alto, CA 94304 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** political online advertising Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

Office held:

Office sought:

(512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Legal Services Food/Beverage Expense Polling Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Consulting Expense Travel In District Event Expense Travel Out Of District OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Riley, Christopher 00010009 Schedule: 5/11 Report: 28/35 4 Date 5 Payee name 10/23/2014 Facebook 7 Payee address City; State; Zip Code 6 Amount (\$) 1601 S. California Ave. \$770.15 Palo Alto, CA 94304 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** political advertising Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name First Data 10/03/2014 Payee address City: State: Zip Code Amount (\$) 5565 Glenridge Connector NE Atlanta, GA 30342 \$238.53 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name First Data 10/03/2014 Payee address City; State; Zip Code Amount (\$) 5565 Glenridge Connector NE Atlanta, GA 30342 \$37.90 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/03/2014 First Data Payee address City; State; Zip Code Amount (\$) 5565 Glenridge Connector NE Atlanta, GA 30342 \$297.81

Description

Credit card processing fees

Office sought:

Check if Austin, TX, officeholder living expense

Category (See Categories listed at the top of this schedule)

Accounting/Banking

Candidate / Officeholder name

PURPOSE

Complete ONLY if

direct expenditure to benefit C/OH

OF **EXPENDITURE** (If travel outside of Texas, complete Schedule T)

Office held:

SCHEDULE F

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Event Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) PAGE# Riley, Christopher 00010009 Schedule: 6/11 Report: 29/35 4 Date 5 Payee name Gaines, Rose 10/24/2014 6 Amount (\$) Payee address City; State; Zip Code 707 W. 21 St., 4D1B \$133.00 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/01/2014 Green, Joe Amount (\$) Payee address City; State; Zip Code 300 Crockett St. \$429.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 10/15/2014 Green, Joe Payee address Amount (\$) City; State; Zip Code 300 Crockett St \$147.50 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Ivory, J'vona 09/30/2014 Amount (\$) Payee address City: State; Zip Code 150 Klattenhoff Lane #5207 Q \$725.00 Hutto, TX 78634 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Salary **PURPOSE** Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services
Food/Beverage Expense
Polling Expense
Benting Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

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1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 7/11 F	1° an	00010009
4 Date	5 Payee name	00010000
10/15/2014	Ivory, J'vona	
6 Amount (\$)	7 Payee address City, State; Zip Code	
\$725.00	150 Klattenhoff Lane #5207	
\$725.00	Hutto, TX 78634	•
	·	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Salary
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		·
Date	Payee name	•
09/27/2014	Kelly Graphics	
Amount (\$)	Payee address City; State; Zip Code	
. ` '	1 ' '	
\$2,313.22	1409 Quaker Ridge Austin, TX 78746	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•
	Category (See Categories listed at the top of this schedule)	Description (if travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Printing, postage and mailing services
OF EXPENDITURE		
EXPENDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name Kelly Graphics	
10/08/2014 Amount (\$)	Payee address City, State, Zip Code	<u> </u>
1		
\$11,652.10	1409 Quaker Ridge Austin, TX 78746	·
· ·	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Printing, postage and mailing services
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
10/21/2014	Kelly Graphics	·
Amount (\$)	Payee address City; State; Zip Code	
	1409 Quaker Ridge	
\$19,346.84	Austin, TX 78746	
· ·	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Printing, postage and mailing services
OF EXPENDITURE		
EXI ENDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	t	
	I	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	//Rental Expense OTHER (enter a category not listed above) www.to.complete.this.form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 8/11 F	Report: 31/35 Riley, Christopher	00010009
4 Date	5 Payee name	
10/24/2014	Macin, Francis	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$210.00	2514 Pearl St.	
	Austin, TX 78705	•
8 8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
09/30/2014	Nalley, Jamie	
Amount (\$)	Payee address City; State; Zip Code	
\$500,00	3413 Cedar St. Unit A Austin, TX 78705	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor
OF	Salaries/Wages/Contract Labor	Contract labor
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Officerolder frame	Office sought.
Date	Payee name	
10/15/2014	Nalley, Jamie	
Amount (\$)	Payee address City; State; Zip Code	
\$500.00	l	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Contract labor
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/02/2014	NGP Van, Inc.	
Amount (\$)	Payee address City; State; Zip Code	
\$320.00	1105 15th Street NW, Ste. 500 Washington, DC 20005	,
PURPOSE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) database software
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	·	•

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

P.O.Box 12070

EXPENDITURE CATEGORIES

salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Riley, Christopher 00010009 Schedule: 9/11 Report: 32/35 4 Date 5 Payee name Postmaster 10/08/2014 7 Payee address City; State; Zip Code 6 Amount (\$) 3507 N. Lamar Blvd \$28.00 Austin, TX 78703 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** post office box renewal Office Overhead/Rental Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: 9 Complete ONLY if Office held: direct expenditure to benefit C/OH Date Payee name 10/15/2014 Postmaster Amount (\$) Payee address City; State; Zip Code 3507 N. Lamar Blvd Austin, TX 78703 \$196.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** postage Printing Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/01/2014 San Gabriel, Ltd. Amount (\$) Payee address City: State: Zip Code Live Oak Gottesman \$1,200.00 Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Rent' Office Overhead/Rental Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Susan Harry Consulting, LLC 09/30/2014 Pavee address City: State: Zip Code Amount (\$) P.O. Box 301074 \$3,000.00 Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Fundraising & compliance consulting **PURPOSE** Consulting Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Legal Services Food/Beverage Expense Polling Expense Transportation Equipment & Related Expense Contributions/Donations Made By Consulting Expense Event Expense Travel In District Travel Out Of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Riley, Christopher 00010009 Schedule: 10/11 Report: 33/35 4 Date 5 Payee name Tompkins, Nicholas 10/24/2014 7 Payee address City; State; Zip Code Amount (\$) 1919 Burton \$280.00 Austin, TX 78741 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Wooding, John 10/06/2014 City: State; Zip Code Amount (\$) Payee address 3601 Willow Springs Rd. Apt. 104 \$455.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Wooding, John 10/15/2014 Amount (\$) Payee address City; State; Zip Code 3601 Willow Springs Rd. Apt. 104 \$331.50 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Worley Printing 10/15/2014 Amount (\$) Payee address City: State: Zip Code 3217 North IH 35 \$305.80 Austin, TX 78722 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Printing **PURPOSE Printing Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

Office held:

Office sought:

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Gits/Awards/Memorial E: Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District
Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# Riley, Christopher 00010009 Schedule: 11/11 Report: 34/35 5 Payee name

10/20/2014	Worley Printing	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$305.80	3217 North IH 35 Austin, TX 78722	-
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Printing Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/21/2014	Wortham Insurance & Risk Management	
Amount (\$)	Payee address City; State; Zip Code	
\$638.91	PO Box 301819 Dallas, TX 75303	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) rental insurance Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/21/2014	Your Fliers Delivered	
Amount (\$)	Payee address City; State; Zip Code	
,\$3,600.00	603 Bull Creek Parkway Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) delivery services
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Texas Ethics Commission

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

The Instruction Guide explains how to complete this form.

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Riley, Christopher Schedule: 1/1 Report: 35/35 00010009 4 Date 5 Payee name 10/01/2014 Austin NAACP Amount (\$) Payee address City; State; Zip Code 1709 E. 12th St. \$75.00 Austin, TX 78702 Reimbursement from political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) (if travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Event ticket Candidate/Officeholder/Political Committee EXPENDITURE Check if Austin, TX, officeholder living expense Date Рауее пате Austin NAACP 10/01/2014 Payee address City; State; Zip Code Amount (\$) 1709 E. 12th St. Austin, TX 78702 \$100.00 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Political print advertising OF **EXPENDITURE** Check if Austin, TX, officeholder living expense